



Multnomah Athletic Club

Membership Application - Spouse Adding to Account

PART I TO BE COMPLETED BY APPLICANT					
APPLICANT	<u>MR MICHAEL GREGORY WEBER</u>				MEMBER #
	Title	First	Middle	Last	
CURRENT MEMBER	<u>MS</u>	<u>MARIE</u>	<u>MARCY</u>	<u>WEBER</u>	MEMBER # <u>401420</u>
	Title	First	Middle	Last	

HOME ADDRESS	<u>1378 SW TAYLORS FERRY RD</u> <u>PORTLAND OR 97219</u>	
HOME PHONE	CELL	<u>503 702 4764</u>
E-MAIL	<u>WALNUTS678@GMAIL.COM</u>	
BIRTHDATE	<u>8-19-1971</u>	GENDER <u>M</u>

MEMBERSHIP CATEGORY	
Check One:	<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Nonresident
Please indicate:	
<input checked="" type="checkbox"/> Applicant is at least 30 years old	
<input type="checkbox"/> Both applicant and spouse are under 30 years of age	

CHILDREN	LIST CHILDREN AGES BIRTH TO 25 YOU WISH TO BE INCLUDED ON YOUR ACCOUNT.				
	Senior and nonresident members who wish to include children older than seven on their accounts must transfer to a family category and are subject to applicable initiation fees and dues.				
	FIRST	MIDDLE	LAST	GENDER	BIRTHDATE
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____

OCCUPATION	Employer <u>ROYAL MOORE TOYOTA</u> Address <u>1415 SE RIVER ROAD</u> <u>HELLSBORO OR 97123</u>	Occupation <u>NEW CAR MANAGER</u> Work Phone <u>503-648-3213</u> E-Mail <u>MWEBER@ROYALMOORE.COM</u>
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MAILINGS	Mail billing statement to: <input type="checkbox"/> Home <input type="checkbox"/> Business <input checked="" type="checkbox"/> E-Statement Only Billing statements sent by mail will cost \$1 per month starting July 1, 2017 Please note that you are required to notify Member Services if home or business address changes.	Mail all other correspondence/publications to: <input checked="" type="checkbox"/> Home <input type="checkbox"/> Business
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BACKGROUND INFORMATION	<ul style="list-style-type: none"> Has either applicant ever been convicted of a misdemeanor or felony? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Has either applicant ever pled guilty / no contest to a misdemeanor or felony? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Has either applicant ever been charged with a misdemeanor or felony? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <p>If you answered YES to any of the above questions, you must provide a letter of explanation.</p> <p>Please provide an explanation of the event, including the date, nature and jurisdiction of any offense, and the judgment.</p>
	Has either applicant ever been a MAC member? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, when? _____ Under what name(s)? _____

FOR OFFICE USE ONLY

Mailed/PU Date	Received (SF)	Initiation Fee	Posting Date	Background Check	Date to M'ship	Account #	Effective Date

PART II. TO BE COMPLETED AND SIGNED BY THE APPLICANT**SECONDER**

PLEASE PRINT LEGIBLY. PLEASE REVIEW GUIDELINES FOR DETAILS ABOUT QUALIFIED SECONDER.
YOUR SECONDER MAY NOT BE A FAMILY MEMBER AND **MUST** BE A MAC MEMBER.

SECONDER NAME (NON-FAMILY)

JOE FUSTOLO

MEMBER # (REQUIRED)

8405-0

E-MAIL ADDRESS

JOE@JOEFUSTOLO.COM

Have you known the seconder for the required minimum of one year? 10 How long? _____

PROOF OF MARRIAGE, CIVIL UNION, OR EQUIVALENT

☒ I have enclosed a copy of our marriage certificate / government documentation in order to qualify for family membership.

BY SIGNING THIS APPLICATION FORM I ACKNOWLEDGE THE FOLLOWING:

- If the Board of Trustees approves this application, I am responsible for any initiation fee that applies in order to accept a membership. The initiation fee that is in effect for the specific membership category on the date the application is received in Member Services.
- I may withdraw this application at any time prior to paying the initiation fee and accepting the membership. Once the membership is accepted and the initiation fee is paid or under a payment plan contract, the fee is nonrefundable.
- I grant Multnomah Athletic Club permission to obtain a personal financial/character/criminal report relative to my application.
- Upon approval of this application by the Board of Trustees, I agree to accept full responsibility for payment of account and compliance with Club Rules.
- The fact that I am applying for senior membership does not confer any contractual or additional rights upon this application or obligations to the Membership Committee or Board of Trustees, and that the acceptance or rejection of the application is within the absolute discretion of the Membership Committee and Board of Trustees.
- All membership application materials are confidential and will not be disclosed to parties outside of the evaluation process.
- Any false or misleading information on this application may be cause for denying membership.
- I have read and understand the Guidelines for Completing a MAC Application.

Signature of Applicant

Date

Signature of Current Member

Date

PART III. TO BE COMPLETED AND SIGNED BY THE PROPOSER**PROPOSER**

PLEASE PRINT LEGIBLY. PLEASE REVIEW GUIDELINES FOR DETAILS ABOUT QUALIFIED PROPOSERS.

THE PROPOSER **MAY** BE A FAMILY MEMBER AND **MUST** BE A MAC MEMBER.

PLEASE NOTE: IF THE PROPOSER IS A FAMILY MEMBER, **NO LETTER OF RECOMMENDATION IS REQUIRED.**

IF YOU ARE REQUIRED TO SUBMIT A LETTER, YOU WILL BE CONTACTED AT A LATER DATE.

Is the applicant a family member? _____ What is your relation to the applicant? _____

Have you known the applicant for the required minimum of three years? _____ How long? _____

I accept responsibility for the completeness and accuracy of the information on this form and understand that any misrepresentation may disqualify the applicant(s). I understand that my membership in the Multnomah Athletic Club confers no contractual or additional rights to the applicant(s) or obligations to the Membership Committee or Board of Trustees. I acknowledge that the acceptance or rejection of this application is within the absolute discretion of the Membership Committee and Board of Trustees.

MARIE WEBER

PRINT NAME

marie@hotmail.com

E-MAIL ADDRESS

SIGNATURE

401420

MEMBER#(REQUIRED)

5/2/2024

DATE



Multnomah Athletic Club

MAC AGREEMENT RELEASE AND WAIVER OF LIABILITY

1. I understand and acknowledge that club participation may be dangerous and may involve risks which include, but are not limited to, bodily injury, partial or total disability, paralysis and death. I also understand and acknowledge that the social and economic losses or damages which can result from those risks and dangers can be severe and that not all such risks and dangers may be known or reasonably foreseeable at this time. I accept the responsibility for losses or damages resulting from all such risks and dangers involved in club participation.

2. I agree to take appropriate precautions for my own safety and that of others when participating in activities and further agree that, before participating I will inspect the facilities and equipment to be used and will, if I believe anything is unsafe, immediately advise the person in charge of that unsafe condition and will refuse to participate.

3. I hereby release, waive and discharge MAC, its coaches, instructors, officials and volunteers engaged by MAC, in the conduct of club activities, and MAC officers, directors, agents and employees, from all liability to me and to my conservators, guardians or other legal representatives, assigns, heirs and next of kin for any and all claims, demands, losses or damages on account of any injury, death or damage to property, arising out of my participation in club activities, arising from negligence, whether on MAC premises or elsewhere, including transportation of myself and/or my child/ward to and from events and venues.

4. If competing in an offsite event/venue, I assume responsibility for transportation of myself and/or my child(ren)/ward(s) to and from those events and/or venues.

5. I also hereby agree to indemnify and to hold harmless from any claim or demand on account of injury or damage which I may suffer as a result of participation in club activities, MAC and all other persons mentioned in Paragraph 3.

6. I understand that this release, waiver and agreement to indemnify and hold harmless includes, but is not limited to, damages which are caused, or alleged to be caused, in whole or in part by the negligence of MAC and the individuals listed in Paragraph 3.

I am the parent or legal guardian of those participant(s) who are associated with my membership account/application, who is under the age of 18 years, and who wishes to participate in the Multnomah Athletic Club's activities. In consideration of the Multnomah Athletic Club's allowing my child(ren) or ward(s) to participate in club activities, I hereby agree to indemnify the Multnomah Athletic Club and all other persons described in Paragraph 3 above, and to hold each and all of them harmless from any claim or demand on account of injury to or damage suffered by my child(ren) or ward(s) as a result of participation in club activities, whether on Multnomah Athletic Club premises or elsewhere.

I acknowledge it is my responsibility to deliver my child(ren) to any activities and to pick up my child(ren) promptly upon the scheduled conclusion of such activities. If competing in an offsite event/venue, I assume responsibility for transportation of myself and/or my child(ren)/ward(s) to and from those events and/or venues.

This agreement includes, but is not limited to, claims or demands on account of injury or damage caused or allegedly caused by the negligence of MAC or any of the individuals listed in Paragraph 3.

I have read the above agreement of release and waiver of liability and understand that agreeing to this waiver I have given up substantial rights. I agree to this agreement voluntarily.

Signature of applicant/member 1: [Signature] Print Name: MICHAEL WEBER Date: 5/2/2024

Signature of applicant/member 2: _____ Print Name: _____ Date: _____

☐ Parental Consent to Treat: I wish to provide consent and have completed the form below:

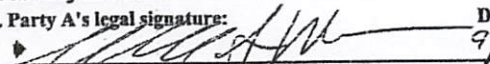
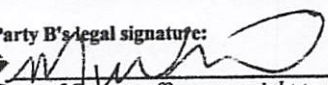
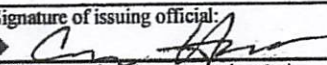
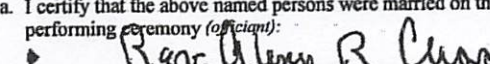
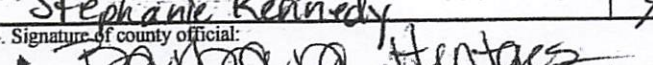
I am the natural parent and/or guardian of registered children who are associated with my account, do hereby fully authorize Multnomah Athletic Club coaching staff or designated chaperones to act on my behalf in the event my child(ren) is the victim of an accident, injury or illness that requires immediate medical or surgical care. Actions on behalf of my child(ren) shall include but not be limited to authorization for Multnomah Athletic Club coaching staff or other chaperones to arrange for such medical care as they deem appropriate, substantiated by local medical advice, and to give any required consent for such medical care.

Signature of applicant/member 1: _____ Date: _____

Signature of applicant/member 2: _____ Date: _____

Emergency Phone: _____ Alternate Phone: _____ Account #: _____

APPLICATION, LICENSE, AND RECORD OF MARRIAGE

LOCAL OFFICIAL	County: MULTNOMAH	License effective on or after: SEPTEMBER 11, 2016	License expires (month, day, year): NOVEMBER 09, 2016		
PARTY A: Groom, Bride or Spouse	PARTY A is (check one): <input checked="" type="checkbox"/> Groom <input type="checkbox"/> Bride <input type="checkbox"/> Spouse				
	1a. Legal name (first, middle): MICHAEL GREGORY		Last WEBER		
	1b. Legal name at birth (if different):		1c. Previous name (if different):		
	2. Birthplace (state or foreign country): OREGON		3. Date of birth (month, day, year): AUGUST 19, 1971		
	4. Age (18 or older, 17 with consent): 45				
	5. Sex: MALE	6. Occupation: SALES MANAGER			
	7. Previous marital status (single, widowed, divorced): DIVORCED				
	8a. Father's name (first, middle, legal surname prior to first marriage): HOWARD GREGORY WEBER		8b. Birthplace (state or foreign country): OREGON		
	9a. Mother's name (first, middle, legal surname prior to first marriage): JANICE PAULETTE GAMBARO		9b. Birthplace (state or foreign country): OREGON		
	10a. Address: Street and number 1378 SW TAYLORS FERRY ROAD		City or town PORTLAND	State/country OREGON	ZIP 97219
11. Legal name taken after marriage (first, middle): MICHAEL GREGORY		Last WEBER			
PARTY B: Groom, Bride or Spouse	PARTY B is (check one): <input type="checkbox"/> Groom <input checked="" type="checkbox"/> Bride <input type="checkbox"/> Spouse				
	12a. Legal name (first, middle): MARIE NANCY		Last BRICE		
	12b. Legal name at birth (if different):		12c. Previous name (if different):		
	13. Birthplace (state or foreign country): OREGON		14. Date of birth (month, day, year): MARCH 23, 1970		
	15. Age (18 or older, 17 with consent): 46				
	16. Sex: FEMALE	17. Occupation: MEDICAL SOCIAL WORKER			
	18. Previous marital status (single, widowed, divorced): SINGLE				
	19a. Father's name (first, middle, legal surname prior to first marriage): GLYN ALAN BRICE		19b. Birthplace (state or foreign country): OREGON		
	20a. Mother's name (first, middle, legal surname prior to first marriage): SHARON MARIE PEARSON		20b. Birthplace (state or foreign country): OREGON		
	21a. Address: Street and number 1378 SW TAYLORS FERRY ROAD		City or town PORTLAND	State/country OREGON	ZIP 97219
22. Legal name taken after marriage (first, middle): MARIE NANCY		Last WEBER			
AFFIDAVIT OF AGE	23. <input type="checkbox"/> Party A - name and address of affiant:				
	24. <input type="checkbox"/> Party B - name and address of affiant:				
SIGNATURES	We hereby certify that the information provided is correct to the best of our knowledge and belief and that we are free to marry under the laws of this state.				
	25. Party A's legal signature:  Date: 9/8/16 26. Party B's legal signature:  Date: 9/8/16				
LICENSE TO MARRY	Neither you nor your spouse is the property of the other. The laws of the State of Oregon affirm your right to enter into marriage and, at the same time, to live within the marriage free from violence and abuse.				
	This license authorizes the marriage in this state of the parties named above by any person duly authorized to perform a marriage ceremony under the laws of the State of Oregon.				
CEREMONY	27. Date license issued: SEPTEMBER 08, 2016	28. Signature of issuing official: 		29. Title of issuing official: DEPUTY	
	30a. Date of marriage: 10/8/16	30b. Where married (city, town or location): Mr. Carmel Lutheran Portland OR		30c. County: MULTNOMAH OREGON	
	31a. I certify that the above named persons were married on the date listed above (30a). Signature of person performing ceremony (officiant): 		31b. Title: Pastor		
	31c. Name and address of officiant (person performing ceremony): Name: Glenn Chase Address: 5838 NE 30th Portland OR 97211 Phone: 503-425-3431		31d. Name and address of authorizing religious congregation/organization of officiant: Name: Mr. Carmel Lutheran Church Address: 515 S.W. Maplecrest Dr. Portland OR 97219 Phone: 503-244-5143		
	32. Witness name (print): Stephanie Kennedy		33. Witness name (print): Howard G. WEBER		
LOCAL OFFICIAL	34. Signature of county official: 		35. Date filed by county official (month, day, year): 10/8/2016		



STATE OF OREGON }
County of Multnomah } SS

The foregoing copy has been compared and is certified by me as a full, true and correct copy of the original on file in my office and in my custody.

In Testimony Whereof, I have hereunto set my hand and affixed the seal of the office.

on: 11/29/2016

by: _____

Christine Hamblen - Deputy

Division of Assessment, Recording & Taxation



Multnomah Athletic Club

Letter of Recommendation Guidelines

You have been named by the applicant(s) listed below as a Proposer or Seconder for Multnomah Athletic Club membership. Your honest appraisal of the applicant(s) is appreciated and will help maintain the high quality of the MAC membership. All information you share will be confidential.

The following guidelines will assist proposers and seconders in completing Letters of Recommendation for applicants they are supporting.

- **Proposers:** Proposers who are not family members of applicants must submit a Letter of Recommendation.
- **Seconders:** All seconders must submit a Letter of Recommendation to Member Services regarding the applicant.

Each Letter should include:

- The type and duration of the person's relationship with the applicant
- A description of the applicant's friendliness and congeniality
- A description of the applicant's character, ethics, and integrity
- A description of the applicant's professional or community engagement or a description of the applicant's volunteerism
- A description of the applicant's roots in the community
- If known on a professional level, the recommendation letter should also include a description of the applicant's tenure and responsibilities of their position

I am writing to recommend my friend Michael Weber for membership in the club. I've known Michael for about 10 years, and in that time, I've found him to be a friendly and easygoing person. He is easy to get along with and always has a warm and welcoming attitude. I believe his positive demeanor would make him a great addition to our group.

Michael is also someone who stands out for his strong ethics and integrity. He has a clear sense of right and wrong and consistently makes choices that reflect his good character. I have always admired how he handles situations with honesty and fairness. His solid principles make him someone you can trust and respect.

Additionally, Michael is deeply committed to giving back to the community. He is involved in various activities and always looks for ways to help others. His dedication to making a difference in the lives of those around him speaks volumes about his character. I believe our club would benefit greatly from having someone like Michael as a member, and I am confident he would contribute positively to our shared goals and values.

I met Michael through work about 10 years ago, and he quickly stood out as a hard-working, detail-oriented, and punctual individual. Over the years, I've also come to know him as someone with deep roots in the community. He cares about the people around him and is always looking for ways to contribute and give back. He is particularly concerned about preserving this great Earth we live on. I believe he would be a great fit for the club, bringing both his strong work ethic and his commitment to the community.

DocuSigned by:

 8BD3C3D865414DA...
 Signature

Joe Fustolo

Name

Please Note: In your capacity as member proposer or seconder, you are acting on behalf of Multnomah Athletic Club. You are asked to provide complete and detailed information about the applicant(s) in order to assist the Membership Committee and the Board of Trustees in judging the character of the applicant(s) and the merits of their application. Incomplete letters will be necessarily returned for completion.



Multnomah Athletic Club

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- A description of the applicant's character, ethics, and integrity
- A description of the applicant's professional or community engagement or a description of the applicant's volunteerism
- A description of the applicant's roots in the community
- If known on a professional level, the recommendation letter should also include a description of the applicant's tenure and responsibilities of their position

I am writing to recommend Michael Weber as a member for the Multnomah Athletic Club. I met Michael through his wife, Marie 5 years ago and believe he would be a great fit for the club. Michael is friendly and approachable and is always willing to help someone out; he takes pride in being able to walk individuals through complex processes and to help them feel good about the end result. A devoted dad and husband, he has supported his wife and children through the last few years of uncertainty and change with great success. I have no concerns about his character and believe he would be a member with the utmost integrity. Please do not hesitate to reach out to me if you have further questions.

Signed by:

 82DE2673C26647D...
 Signature

Emily James
 Name

Please Note: In your capacity as member proposer or seconder, you are acting on behalf of Multnomah Athletic Club. You are asked to provide complete and detailed information about the applicant(s) in order to assist the Membership Committee and the Board of Trustees in judging the character of the applicant(s) and the merits of their application. Incomplete letters will be necessarily returned for completion.



Post Office Box 5920, Scottsdale, AZ 85261
1-877-263-8033 | www.universalbackground.com

Report Requested By:
MULTNOMAH ATHLETIC CLUB

Consumer Report - Order # 37291587

Name:

Michael Gregory Weber

Address:

1378 SW Taylors Ferry Rd
Portland, OR 97219

SSN:

DOB:

Phone:

Email:

***-**-4131

08/19/****

(503)702-4764

walnut5678@gmail.com

Summary for Michael Gregory Weber		
Search Type	Details	Status
Social Security Address/Alias Trace		See Details
USA CriminalSearch Plus		No Record
County Criminal Court Search	BERKELEY, SC	No Record
Statewide Criminal Court Search	OR	No Record
Federal District Criminal Search	FEDERAL District, OR	No Record
Federal District Criminal Search	FEDERAL District, SC	No Record

Report Detail for Michael Gregory Weber

Social Security Address/Alias Trace

#109542033

Date Ordered

06/03/2024

Date Completed

06/03/2024

Validation

This is a Valid Social Security Number. (This is a Valid Social Security Number. Issued in Oregon between 1986 and 1987.)

Status

No Discrepancy Detected

The SSN is associated with the name provided.

The information contained in the Social Security Number Address/Alias Trace is a research tool and is not considered a consumer report or investigative consumer report. While the trace is useful to establish an association between the name and SSN provided, it does not provide a definitive match or verification. It should not be used as a factor for taking any adverse action against this individual.

USA CriminalSearch Plus

#109542035

Date Ordered	06/03/2024	Date Completed	06/12/2024
Status	No Record Found		
<div>> USA OffenderSearch</div>			
<div>* Criminal records researched include delayed and historical archive databases which can affect availability in some jurisdictions.</div> <div>🔄 Checking for documents ...</div>			
County Criminal Court Search			#109542038
Date Ordered	06/03/2024	Date Completed	06/04/2024
Status	No Record Found		
Jurisdiction/Location	BERKELEY, SC		
Scope of Search	Records were searched for a minimum of 7 years		
Statewide Criminal Court Search			#109542040
Date Ordered	06/03/2024	Date Completed	06/04/2024
Status	No Record Found		
Jurisdiction/Location	OR		
Scope of Search	Records were searched for a minimum of 7 years		
Federal District Criminal Search			#109542041
Date Ordered	06/03/2024	Date Completed	06/04/2024
Status	No Record Found		
Jurisdiction/Location	FEDERAL District, OR		
Scope of Search	Records were searched for a minimum of 7 years		
Federal District Criminal Search			#109542042
Date Ordered	06/03/2024	Date Completed	06/04/2024
Status	No Record Found		
Jurisdiction/Location	FEDERAL District, SC		
Scope of Search	Records were searched for a minimum of 7 years		

This information is a consumer report or investigative consumer report as defined by the federal Fair Credit Reporting Act (FCRA) and applicable state laws. This report does not guarantee the accuracy or truthfulness of the information, but only that it is accurately copied from public records. The end user of this report agrees to comply with the Fair Credit Reporting Act (FCRA), and all other federal, state and local laws governing the confidentiality and dissemination of this information. If any adverse action may be taken based in whole or in part on this consumer report, the end-user is obligated to follow the adverse action procedures as outlined in the FCRA and applicable state and local laws. AZ DPS License #1001268